PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003									Application of Docket Number 10/75/582				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TO	OTAL CLAIMS		15					RATE	FEE]	RATE	FEE	
FC)A		NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			> minus 20=		. 0			X\$ 9=		OR	X\$18=		
INE	EPENDENT C	LAIMS	& m	nus 3 =	Q			X43=		OR	X86=		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	-	OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER		
7	7.00	(Column 1) (Column 1) INGHI				E) (0010111110)			ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT	•	NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 15	Minus	-0	0	=		X\$ 9=		OR	X\$18=		
	Independent	• 2	Minus	<u>~3</u>				X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	 	OR	+290=		
								TOTAL	•		TOTAL	/	
5-31-05 (Column: 1) (Column 2) (Column 3)								DDIT. FEE	<u> </u>	JOH ,	ADDIT. FEB		
		CLAIMS		HIGH	ST		lг		ADDI-	l f		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	. 15	Minus	• à	0			X\$ 9=	-	OR	X\$18=	Ĵ	
AME	Independent	· 3	Minus	*** 🤇	3	<u> </u>		X43=	<u>_</u>	OR	X86=	Ĵ	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										+290=		
						•	L	+145= TOTAL		OR	TOTAL		
						•	AE	DIT. FEE		OR ,	DOM. FEE	<u></u>	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
ENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	••		- .		X\$ 9= ·		OR	X\$18=		
	independent	•	Minus	***		=	 	X43=		. 1	X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
• ~		Ŀ	+145= .		OR	+290=							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. **Of the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3.													
		noer Previously Paid ber Previously Paid					r found	in the ap	propriate box	in cot	ımn 1.	ŀ	